

CDC in Mali



The Centers for Disease Control and Prevention (CDC) office in Mali was established in 1995. CDC-Mali works with the Malian government, local partners, and other U.S. government agencies to reduce HIV, malaria, sexually transmitted infections (STIs) and neglected tropical diseases and their impact on individuals, families, and communities. CDC-Mali assists the government in strengthening information systems, integrating comprehensive laboratory services nationwide, responding to public health emergencies and epidemics, developing tools for STI treatment and laboratory quality control, and conducting surveillance, surveys, and studies.

Staff

CDC office (physical presence)
2 U.S. Assignees
7 Locally Employed

At a Glance

Population: 15,200,000
Per capita income: \$1,090
Life expectancy at birth women/men: 53/50 yrs
Infant mortality rate: 116/1000 births

Source: Population Reference Bureau Fact Sheet, 2011

Top 10 Causes of Death

1. Malaria 24%
2. Lower Respiratory Infections 6%
3. Diarrheal Diseases 6%
4. Protein-Energy Malnutrition 5%
5. Sepsis 5%
6. Preterm Birth Complications 4%
7. Meningitis 4%
8. HIV 3%
9. Cancer 3%
10. Tuberculosis 2%

Source: GBD Compare (<http://viz.healthmetricsandevaluation.org/gbd-compare/>), 2010



HIV/AIDS

Through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the CDC Mali office works closely with the Ministry of Health (MOH) and other local partners to improve the HIV program by building country capacities needed to mount and sustain an effective national HIV response. Importantly, these activities support a data-driven, evidence-based approach that is tailored to the unique characteristics of the local epidemic to boost health impact.

Strategic focus areas include: improved laboratory capacity; HIV counseling and testing services for key populations, guideline development for HIV diagnosis and treatment, child survival activities, surveillance, epidemiological studies, blood safety, and health information systems for program monitoring and evaluation to assess impact and make rapid course corrections as needed to keep pace with changes in the local epidemic.

CDC also strives to assist Mali in the development of national policies that support HIV prevention and care for high risk populations including youth and adolescents. In addition, CDC conducts research to identify high risk populations and designs appropriate interventions to reach them.

Field Epidemiology Laboratory and Training Program

West Africa Field Epidemiology Laboratory Training program was established in December 2007 to strengthen surveillance, outbreak investigation, and response efforts in French speaking countries in West Africa. In Mali, the two-year program trains leaders in field epidemiology and public health laboratory practice, and provides epidemiological services to national and sub-national health authorities.



This specialized training program improves public health systems within the country by increasing knowledge and skills and building a cadre of skilled and well-trained health professionals in Mali.

Influenza

One of five new laboratories that have joined the WHO External Quality Assessment Project (EQAP) for influenza laboratories. As a result, the performance on influenza EQAP for 26 laboratories in 24 countries is being monitored. One of fifteen countries that are being supported to maintain virological surveillance of influenza through provision of reagents and supplies for specimen collection and conducting PCR by the WHO African Regional Office. In addition to our bilateral work, we also partner with the U.S. Naval Medical Research Unit No. 3 (NAMRU-3) in Accra, Ghana to jointly support Mali to start influenza surveillance.

Malaria

Under the U.S. President's Malaria Initiative (PMI), CDC has assigned a Resident Advisor to Mali as part of an interagency team with USAID to support the Ministry of Health in implementing malaria prevention and control interventions; these include providing long-lasting insecticide mosquito nets and indoor residual spraying; preventing malaria in pregnancy; improving diagnostics and case management; surveillance, and monitoring and evaluation of malaria-related activities. Specific examples of CDC technical support have included: the introduction of a "container insectary" as an approach to support entomological monitoring as a cost-effective solution to improve the quality of insecticide residual spraying, providing scientific guidance in the development of an operational research proposal to evaluate dual-insecticide long-lasting insecticide-treated bed nets, and provide technical assistance to refine the quality assurance of rapid diagnostic tests throughout the health system down to the community level and recommend best practice for implementation.

Neglected Tropical Diseases

CDC developed and evaluated a new way to map Neglected Tropical Diseases (NTDs) in Mali. In collaboration with the Malian Ministry of Health, an integrated mapping protocol was tested in Banamba district, where 5 NTDs are believed to be endemic. The new protocol is easier and faster to implement – using fewer personnel, vehicles and time – than the previous non-integrated method. It is also more practical since a central testing site is established in each village and provides more precise results for schistosomiasis treatment, making it possible to more efficiently distribute medication by targeting highly-endemic, at-risk zones for schistosomiasis.

CDC is working in collaboration with the CDC Foundation and the Ministry of Health (with funding received from the Izumi Foundation) in the development of a national filariasis morbidity control program in Mali through the establishment of a lymphedema management program, a program that will be made available for every person in three regions in Mali.

Impact in Mali

- Mali has not detected a case of WPV since June 2011.
- 8,800 Malians screened and treated for sexually transmitted infections.
- 62,555 women tested for HIV in clinics specializing in preventing mother to child transmission of HIV.
- 167,000 Malians received behavioral change communication messages through community outreach programs promoting HIV/AIDS prevention.

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